

Janet T. Mills  
Governor

Jeanne M. Lambrew, Ph.D.  
Commissioner



Maine Department of Health and Human Services  
Office of MaineCare Services – Delivery System Reform  
11 State House Station  
Augusta, Maine 04333-0011  
Toll Free: (866) 796-2463; TTY: Dial 711 (Maine Relay)  
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## Accountable Communities

### Quality Measures, Performance Year 7 (8/1/2020-7/31/2021)

Measure	Core/Elective/ Monitoring	Measure Definition	Comparison group
<i>Chronic Conditions</i>			
1. Use of Spirometry Testing, COPD	Core	Percentage of MaineCare members 40 years of age and older with a new diagnosis of COPD or newly active COPD, who received appropriate spirometry testing to confirm the diagnosis HEDIS (SPR)	Maine non-AC
2. Controlling High Blood Pressure	Core	Percentage of Members age 18-85 years who had a diagnosis of hypertension and whose blood pressure was adequately controlled, e.g., <140/90 mmHg HEDIS (CBP)	Evidence-Based Benchmark
3. Diabetic Glucose (a) Glucose Poor Control (b) HbA1c Testing	Core	(a) <i>HbA1c Poor Control</i> : Percentage of Members age 18-75 years with diabetes whose most recent HbA1c level during the measurement year was greater than 9.0% or was missing a result, or if an HbA1c test was not done during the measurement year.	(a) Evidence-Based Benchmark (b) Maine non-AC

*Last Updated: August 27, 2021*

*Questions? Contact the AC Team at [Accountable.CommunitiesDHHS@maine.gov](mailto:Accountable.CommunitiesDHHS@maine.gov)*

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		(b) <i>HbA1c Testing</i> : Percentage of Members age 18-75 years with diabetes who received an HbA1c test during the measurement year. HEDIS (CDC)	
<i>Behavioral Health</i>			
4. Screening for Depression	Core	Percentage of Members age 12 years and older screened for clinical depression on the date of the encounter using an age appropriate standardized depression screening tool <i>Modified CMS Child Core Set (CDF-CH) &amp; Adult Core Set (CDF-AD)</i>	Evidence-Based Benchmark
5. Tobacco Use: Screening and Cessation Intervention	Core	Percentage of Members age 18 and older who were screened for tobacco use one or more times within 24 months AND who received tobacco cessation intervention if identified as a tobacco user. eCQM Identifier #138/NQF#0028/CMS 2018 Quality ID #226	Evidence-Based Benchmark
6. Concurrent Use of Opioids and Benzodiazepines	Elective	Percentage of Members age 18 years and older with concurrent use of prescription opioids and benzodiazepines. CMS Adult Core Set (COB-AD)	Maine non-AC practices
7. Follow-Up after Hospitalization for Mental Illness	Elective	Percentage of discharges for Members 6 years and older who were hospitalized for treatment of selected mental health disorders and who had an outpatient visit, an intensive outpatient encounter, or partial hospitalization with a mental health practitioner within 7 days of discharge. HEDIS (FUH)	Maine non-AC practices
<i>Obesity</i>			

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8. Body Mass Index (BMI) Screening & Follow-Up Plan	Core	Percentage of Members age 18 years and older with a documented BMI during the encounter or during the previous twelve months AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the previous twelve months of the encounter. eCQM Identifier #69/ NQF #0421	Evidence-Based Benchmark
<i>Pediatrics</i>			
9. Developmental Screening – First Three Years of Life	Core	Percentage of children ages one, two and three years who had a developmental screening performed. NQF#1448	Maine non-AC practices
10. Follow Up Care for Children Prescribed ADHD Medication	Core	Percentage of children newly prescribed ADHD medication who had at least three follow-up care visits within a 10-month period, one of which is within 30 days of when the first ADHD medication was dispensed. HEDIS (ADD)	Maine non-AC practices
11. Childhood Immunization Status	Core	Percentage of children age 3 who had four DTap, three IPV, one MMR, three HiB, three HepB, one VZV, four PCV, one HepA, two or three RV, and two flu vaccines by their 3 <sup>rd</sup> birthday. <i>Modified CMS Child Core Set (CIS-CH)</i>	Maine non-AC practices
12. Adolescent Immunization Status	Core	Percentage of adolescents age 16 who had one dose of meningococcal vaccine, one Tdap vaccine, and the complete HPV series by their 16 <sup>th</sup> birthday. <i>Modified CMS Child Core Set (IMA-CH)</i>	Maine non-AC practices
13. Pediatric Well-Care Visits (a) Well-Child Visits ages 10-15 months (b) Well-Child Visits ages 3-6	Core	(a) <i>Well-Child Visits ages 0-15 months</i> Percent of children with 6 or more well-child visits in the first 15 months HEDIS (W15) (b) <i>Well-Child Visits ages 3-6</i>	Maine non-AC practices

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		<p>Percent of children 3-6 years old with at least one well-child visit per year HEDIS (W34) (c) <i>Well-Child Visits ages 7-11</i> Percent of children 7-11 years old with at least one well-child visit per year Modified HEDIS (W34) (d) <i>Adolescent Well-Care Visit (12-21)</i> Percentage of Members who were 12-21 years of age and who had at least one comprehensive well-care visit with a PCP or OB/GYN during the measurement year. HEDIS (AWC)</p>	
14. Lead Screening in Children	Core	<p>Percentage of children 2 years of age who had one or more capillary or venous lead blood test for lead poisoning by their second birthday. HEDIS (LSC)</p>	Maine non-AC practices
<i>Avoidable Use</i>			
15. Prevention Quality Indicator #92: Prevention Quality Chronic Composite	Core	<p>Prevention Quality Indicator (PQI) composite of chronic conditions per 100,000 population, ages 18 years and older. AHRQ (PQI #92)</p>	Maine non-AC practices
16. Non-emergent ED Use	Core	<p>Members' non-emergent ED visits per 1,000 member months.</p>	Maine non-AC practices
17. Plan- All Cause Readmission	Core	<p>For Members 18 years of age and older, the number of acute inpatient stays during the measurement year that were followed by an acute readmission for any diagnosis within 30 days HEDIS (PCR)</p>	Maine non-AC practices
<i>Patient Experience</i>			

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18. Patient Experience Survey	Core	Consumer Assessment of Healthcare Providers and Systems (CAHPS, child and adult version) or other validated patient experience measure, to be negotiated by the Department and the AC Lead Entity CAHPS	Evidence-Based Benchmark
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